Debtor 1 Michael James Debtor 2 N.A. (Spouse, if filing) First Name Mode Name United States Bankruptcy Court for the WESTERN District Case number 16-50518	ANUEY Last Fame Last Name	U.S. Bankrupicy Court SEP 20 2016 Rev WDNC Statesville, NC	Check if this is an amended filing
Official Form 106A/B			amended ming
	_		
Schedule A/B: Property		77	12/15
In each category, separately list and describe items category where you think it fits best. Be as complet responsible for supplying correct information. If mo write your name and case number (if known). Answerence Part 1: Describe Each Residence, Building, I	e and accurate as possible. If two married people re space is needed, attach a separate sheet to thi	are filing together, bo s form. On the top of a	th are equally
1. Do you own or have any legal or equitable interes	t in any residence, building, land, or similar prope	erty?	
No. Go to Part 2. Yes. Where is the property?	What is the property? Check all that apply.	1000 30 -10	
1.1. 330 WALTER GODBEY RA- Street address, if available, or other description	Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
	Manufactured or mobile home Land	s 140,000.	s 70,000 =
W. JEFFERSON N.C. 28694 City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as feet the entireties, or a life	simple, tenancy by
ASHE	Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only	FEE SIMPL	E
County	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
	Other information you wish to add about this ite property identification number:	em, such as local	
If you own or have more than one, list here:	What is the assessed 2 Oberlands		
1.2. 330 WALTER GODBEY NJ. Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Claim	d claims on Schedule D:
Street address, it available, or other description	☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land	Current value of the entire property?	Current value of the portion you own? \$_3, \infty 0.
W. JEFFERSON D.C. 28694 City State ZIP Code	Investment property Timeshare Other 1/3 interest in 1/2 adjaining Who has an interest in the property? Check one.	Describe the nature of interest (such as fee the entireties, or a life FEE SIMPLE)	of your ownership simple, tenancy by e estate), if known.
ASHE	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	Check if this is co	mmunity property
	Other information you wish to add about this item property identification number:	m, such as local	

			What is the property? Check all that apply.	Do not deduct secured cl	aims or exemptions. Per
1.3			☐ Single-family home	the amount of any secure	ed claims on Schedule D:
	Street address, if available	le, or other description	Duplex or multi-unit building		ms Secured by Property.
			Condominium or cooperative	entire property?	Current value of the portion you own?
				\$	\$
			Investment property	Ψ	·
	City	State ZIP Code	Timeshare	Describe the nature	of your ownership
			☐ Other	interest (such as fee the entireties, or a lif	
			Who has an interest in the property? Check one.		— — — — —
			Debtor 1 only		
	County		Debtor 2 only		
			Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
			At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this ite	am such as local	
			property identification number:	s for pages	s 76,000.00
you h	Describe Your	1. Write that number	property identification number:	s for pages	
you o	Describe Your \ Describe Your \ Dwn, lease, or have leg that someone else drive \ vans, trucks, tractors	1. Write that number Vehicles gal or equitable interes. If you lease a vehicle	property identification number:	s for pages→	
you o	Describe Your \ Describe Your \ Down, lease, or have leg that someone else drive \ vans, trucks, tractors	1. Write that number Vehicles gal or equitable interes. If you lease a vehicle	property identification number:	s for pages→	
you o	Describe Your \ Describe Your \ Dwn, lease, or have leg that someone else drive \ vans, trucks, tractors	1. Write that number Vehicles gal or equitable interes. If you lease a vehicle	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one	s for pages not? Include any vehicle and Unexpired Leases.	aims or exemptions. Put
you o you o you o you Cars, No	Describe Your \ Describe Your	Vehicles gal or equitable interes es. If you lease a vehicles , sport utility vehicles	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts, motorcycles Who has an interest in the property? Check one	s for pages not? Include any vehicle and Unexpired Leases.	aims or exemptions. Put d claims on Schedule D
you o you o you o you Cars, No	Describe Your \ Describe Your	Vehicles Jal or equitable interes. If you lease a vehicles , sport utility vehicles	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts, motorcycles Who has an interest in the property? Check one.	not? Include any vehicle and Unexpired Leases. Do not deduct secured clause amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule Dins Secured by Property.
you o you o you o you Cars, No	Describe Your \ Describe Your	Vehicles Jel or equitable interes. If you lease a vehicles Sport utility vehicles BUICK ULTRA	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	not? Include any vehicle and Unexpired Leases. Do not deduct secured clause amount of any secure	aims or exemptions. Put d claims on Schedule Dins Secured by Property.
you o you o you o you Cars, No	Describe Your \ Describe Your	Vehicles gal or equitable interers. If you lease a vehicles, sport utility vehicles BUICK ULTRA	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts, motorcycles Who has an interest in the property? Check one.	not? Include any vehicle and Unexpired Leases. Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule Dons Secured by Property. Current value of the portion you own?
you o you o you o you Cars, No	Describe Your \ Make: Model. Year: Approximate mileage:	Vehicles gal or equitable interers. If you lease a vehicles, sport utility vehicles BUICK ULTRIA 130,000	st in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	not? Include any vehicle and Unexpired Leases. Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on Schedule Dins Secured by Property. Current value of the

3 2	Make:	Gmc_
	Model:	3/4 Ton A.U.
	Year:	1997
	Approximate mileage:	270,000
	Other information:	•

Doern't RUN

Who has an interest in the property? Check one Debtor 1 only Debtor 2 only

Debtor 1 and Debtor 2 only At least one of the debtors and another

lacksquare Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property.

Current value of the
Current value of the entire property?

portion you own?

s 500.00 s 500.00

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3.3.	Make: Model: Year: Approximate mileage: Other information: Blown En	CHEUY 5-16 P.U. 1993 150,000 gine	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$	claims on Schedule D
3.4.	Make: Model: Year: Approximate mileage: Other information:	-	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any securer Creditors Who Have Claim Current value of the entire property? \$ 1000.00	d claims on Schedule D:
	<i>ples:</i> Boats, trailers, mo o		r recreational vehicles, other vehicles, and access ft, fishing vessels, snowmobiles, motorcycle accessor		
4.1.	Make: Alegra Model: Cheuy) Year: 1989 Other information: Rear En Damage		Who fas an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property?	I claims on Schedule D:
If you	own or have more than Make:		Who has an interest in the property? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property?	I claims on Schedule D:
	he dollar value of the pave attached for Part 2	•	l of your entries from Part 2, including any entries ere	for pages	5900.00

ra	15: Describe Your Personal and Household Items	
Do	you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware	
	Tyes. Describe	s 1500.00
7.	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
	collections; electronic devices including cell phones, cameras, media players, games	
	<u>⊇</u> №	. 00
R	T.V., Radio, Cellphone, OUD & VHS Player Collectibles of value	s 600.
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	Yes. Describe	s 200.00
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	Tyes. Describe Electrician Tools	s 150.00
10.	Firearms	
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment D No	
	Yes. Describe	s - 0 -
	None	
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	.
	Pants, Shirts, Jacketts, shoes-Noleather or Designer	\$ 300.00
12	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	Tyes. Describe	\$ 150.00
13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	₩ No	
	Yes. Describe	sO-
14 .	Any other personal and household items you did not already list, including any health aids you did not list	
	→ No Yes. Give specific	~ ~>
	information DVD1s & VCR Movies	s 200.
		
	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$ 200.00 \$100.00

Part 4: Describe Your Financial Assets

Do you own or have any l	egal or equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money you h	nave in your wallet, in your hom	e, in a safe deposit box, and on hand when you file your p	petition	
☐ No ☑ Yes		Cash. Z	200.00	s 200.0°
17. Deposits of money Examples: Checking, so and other sin	avings, or other financial accou milar institutions. If you have m	nts, certificates of deposit; shares in credit unions, brokera ultiple accounts with the same institution, list each.	age houses,	
□ No				
Yes		Institution name:		
	17.1. Checking account:	Eifth Third Bank		s 404.30
	17.2 Checking account:			\$
	17.3. Savings account:	Fifth Third Bank		ss
	17.4. Savings account:	1.1		s 101.28
	17.5. Certificates of deposit:			s ~~~
	17.6. Other financial account:			s 1
	17.7. Other financial account:			\$
	17.8. Other financial account:			5
	17.9. Other financial account:			•
	17.5. Other intaricial account.			*
18. Bonds, mutual funds,	or publicly traded stocks			
Examples. Bond funds,	investment accounts with brok	erage firms, money market accounts		
☐ No ☐ Yes	Institution or issuer name:			
— 165				_
				\$ s
				\$
19. Non-publicly traded s an LLC, partnership, a		rated and unincorporated businesses, including an in	terest in	
′⊒ №	Name of entity:		mership:	1
Yes. Give specific information about	·		_%	\$
them		<u> </u>	%	\$
			— [%] n	\$

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20.	Negotiable instruments i	include personal check	er negotiable and non-negotiable instruments ks, cashiers' checks, promissory notes, and money orders. anot transfer to someone by signing or delivering them.	
	No No	leguer game:		
	Yes. Give specific information about them	Issuer name:		sO-
				s
				\$
21.	Retirement or pension Examples: Interests in If ID No D Yes. List each		91(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	account separately.	Type of account:	Institution name:	K
		401(k) or similar plan:		s0-
		Pension plan:		\$
		IRA:		\$
		Retirement account:		\$
		Keogh:		\$
		Additional account:		\$
		Additional account:		s
			ade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications	
	Ţ Yes	ins	ditution name or individual:	
		Electric:		s -B-
		Gas:		51
		Heating oil:		\$
		Security deposit on ren	ital unit:	\$
		Prepaid rent:		\$
		Telephone:		\$
		Water:		\$
		Rented furniture: Other:		\$
				\$
23.	Annuities (A contract fo	r a periodic payment c	of money to you, either for life or for a number of years)	
	☐ Yes	Issuer name and desi	cription.	_
				5-0-
				S
				·

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26 U.S.C. §§ 530(b)(1), 529A	A, in an account in a qualified ABLE (b), and 529(b)(1).	program, or under a qualified state t	tuition program.	
₩ No				
☐ Yes	Institution name and description. Seg	arately file the records of any interests	i.11 U.S.C. § 521(c)	_
				0-
				3
				\$
				\$
25. Trusts, equitable or future in exercisable for your benefit No	nterests in property (other than anyt t	ning listed in line 1), and rights or po	owers	
Yes. Give specific				
information about them				s
26. Patents, copyrights, tradem	narks, trade secrets, and other intelle	ctual property		
Examples: Internet domain na	ames, websites, proceeds from royaltie	s and licensing agreements		
₩ No				
☐ Yes. Give specific				λ
information about them				s
27. Licenses, franchises, and o	-			
Examples: Building permits, e	exclusive licenses, cooperative associal	ion holdings, liquor licenses, professio	nal licenses	
□ No				
Yes. Give specific				\wedge
information about them				\$
Money or property owed to you	u?			Current value of the portion you own? Do not deduct secured claims or exemptions.
/				ciains of exemptions.
28. Tax refunds owed to you				
¹ No				
Yes. Give specific information		F	ederal: \$	<u> </u>
about them, includin you already filed the		S	tate: \$	
and the tax years			_	
		L	ocal: \$	•
D No	sum alimony, spousal support, child su	oport, maintenance, divorce settlement	i, property settlemen	ı
Yes. Give specific information	ation	.		
			mony:	\$
			aintenance:	3———
			ipp ort :	3———
			vorce settlement:	>
		Pro	operty settlement:	\$
	wes you sability insurance payments, disability b enefits; unpaid loans you made to some		rs' compensation,	
No				
Yes. Give specific information	ation			sO-

Official Form 106A/B Schedule A/B: Property page 7

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31	Interests in insurance policies Examples: Health, disability, or life insuran	ce; health savings account	HSA); credit, homeowner's, or renter's insurance	
	☐ No			
	☐ Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				s <u></u>
				s
				s
32	 Any interest in property that is due you If you are the beneficiary of a living trust, e property because someone has died. No 		ied nsurance policy, or are currently entitled to receive	
	☐ Yes. Give specific information			s6-
33	3. Claims against third parties, whether or Examples: Accidents, employment disputeNo		· · · · · · · · · · · · · · · · · · ·	
	☐ Yes. Describe each claim			s - B -
34	Other contingent and unliquidated claim to set off claims No	ns of every nature, includi	ng counterclaims of the debtor and rights	
	☐ Yes. Describe each claim.			s 0 -
35	5. Any financial assets you did not already	ı list		
	☐ No☐ Yes. Give specific information			s
36	6 Add the dollar value of all of your entrie for Part 4. Write that number here			s 705.61
P	art 5: Describe Any Business-I	Related Property Yo	u Own or Have an Interest In. List any r	eal estate in Part 1.
37	7. Do you own or have any legal or equitab	ole interest in any busines	s-related property?	-
	No. Go to Part 6. Yes. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions
38	Accounts receivable or commissions yo	u already earned		
	☐ No			
	Yes. Describe			\$
39	Office equipment, furnishings, and supp	olies		
. •			machines, rugs, telephones, desks, chairs, electronic devices	
	Yes Describe			\$

Case 16	6-5 9 518
Michael	James
First Mamo	Abdelle Warne

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40 Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
□ No	
☐ Yes. Describe	s ~ \(\bar{C} \) -
	1
41. Inventory No)
☐ Yes. Describe	s
	<u> </u>
42. Interests in partnerships or joint ventures	
□ No	
☐ Yes. Describe	
%	\$
	\$
	\$
And Continued Parks and War Parks are allowed as Maddison	
43. Customer lists, mailing lists, or other compilations No	
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
□ No	\
Yes. Describe	
	\$
	1
44. Any business-related property you did not already list	\
	\
Yes. Give specific information	\$
	s \
	-
	*
	\$
	\$
	\$
of Add the dellawative of all of your entries from Dest E including any entries for gone you have attached	
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	sO
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest I	n
If you own or have an interest in farmland, list it in Part 1.	•••
	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
No. Go to Part 7.	
Yes. Go to line 47.	
	Current value of the
	portion you own? Do not deduct secured claims
	or exemptions
47 Farm animals	
Examples: Livestock, poultry, farm-raised fish	
□ No	
☐ Yes	
	S

48. Crops—either growing or harvested	
Tyes. Give specific information Home Garden	s 16.60
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
☐ Yes	s - 0 -
50. Farm and fishing supplies, chemicals, and feed No	
☐ Yes	s_~ D -
51. Any farm- and commercial fishing-related property you did not already list No	
Yes. Give specific information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	50-
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you, have other property of any kind you did not already list?	
Examples: Season tickets, country club membership	
₽ No	
	\$ <u> </u>
Yes. Give specific	\$
Yes. Give specific	\$ _ 0 ~ 5 \$ _ 10 = 50
Yes. Give specific information	\$
Yes. Give specific information	7
Yes. Give specific information	- M
Yes. Give specific information	
Yes. Give specific information	
Part 8: List the Totals of Each Part of this Form 55 Part 1: Total real estate, line 2 56 Part 2: Total vehicles, line 5 57 Part 3: Total personal and household items, line 15 58 Part 4: Total financial assets, line 36 59 Part 5: Total business-related property, line 45	
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36	- M
Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45	- M
Yes. Give specific information	5 70,000 20

Case 16-50518 Do		1/16 08:33:02	Desc Main	
Fill in this information to identify your case	Percent Perce 11 of 32			
Debtor 1 Michael James Model Name Debtor 2 NA	Garnoy			
(Spouse, If filing) First Name (Line Name)	a Name			
United States Bankruptcy Court for the Wester Case number 16 - 505 18	Mulistrict of IV.C.			
Case number 15 - 503 18 (If known)			Check if	
			amende	eu ming
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secure	ed by Prop	erty	12/15
	two married people are filing together, both are ed the Additional Page, fill it out, number the entries, number (if known).			
 Do any creditors have claims secured by No. Check this box and submit this form Yes. Fill in all of the information below. 	your property? to the court with your other schedules. You have nothing	ng else to report on th	iis form.	
Part 1: List All Secured Claims		Column A	Column B	Column C
for each claim. If more than one creditor ha	ore than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Blueridge Electric M.C.	Describe the property that secures the claim:	s 189.00	s 400.00	s <u>C</u>
P. D. Box 112.	15 400.00 Deposit			
	As of the date you file, the claim is: Check all that apply			
Lewoir NC 28645-0112 City State ZIP Code	☑ Contingent☑ Unliquidated☑ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	U Judgment lien from a lawsuit Other (including a right to offset) Deposit Se	eur:t4		
Check if this claim relates to a community debt				
Date debt was incurred 5-2012	Last 4 digits of account number 6 0 5			
2.2	Describe the property that secures the claim:	s	\$.s
Creditor's Name				
Number Street	As of the date you file, the claim is: Check all that apply	_		
	Contingent			
	Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one. Debtor 1 only	Nature of lien. Check all that apply An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt		_		
Date debt was incurred	Last 4 digits of account number	L 189 AN	1	
Add the dollar value of your entries in (Column A on this page. Write that number here:	5 189.00	ل	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

2.1	Blue	ridge Electi	ric Mem	bership Corp.	On which line in Part 1 did you enter the creditor? 2.1 Last 4 digits of account number 6 5 1
	PBB Number	Street	<u> </u>		
		SIR NC			
	LE NO	SIR	N C State	28645-0112 ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
	Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
					and a digital of docodite fidelines.
	Number	Street			
	City		State	ZIP Code	
	J.,,		Giaic	Zii Gode	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	On which line in Book 4 did you acted the anadises?
	Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Number	Street			
		·····			
	City		State	ZIP Code	

Fill in this information to identify your case:		16 08:33:02 D	esc Main
M. I I	Document Page 13 of 32		
Debtor 1 Michael James Middle Name	Garvey Last Name		
Debtor 2 No A Middle Name	Last Name		
United States Bankruptcy Court for the Wastern Dist	rict of N.C.		
Case number 16.50518			☐ Check if this is an
(If known)			amended filing
Official Form 106E/F			
Schedule E/F: Creditors W	ho Have Unsecured C	laims	12/15
Be as complete and accurate as possible. Use Part List the other party to any executory contracts or ut A/B: Property (Official Form 106A/B) and on Sched creditors with partially secured claims that are listed needed, copy the Part you need, fill it out, number any additional pages, write your name and case number 1. List All of Your PRIORITY Unsecured.	nexpired leases that could result in a claim. ule G: Executory Contracts and Unexpired Lead in Schedule D: Creditors Who Have Claims the entries in the boxes on the left. Attach the mber (if known).	Also list executory co eases (Official Form 10 s Secured by Property.	ntracts on <i>Schedule</i> 16G). Do not include any . If more space is
Do any creditors have priority unsecured claim: Do any creditors have priority unsecured claim: Do any creditors have priority unsecured claim:	s against you?		
12 Yes.			
 List all of your priority unsecured claims. If a creach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the cunsecured claims, fill out the Continuation Page of (For an explanation of each type of claim, see the interpretation.) 	a claim has both priority and nonpriority amount claims in alphabetical order according to the cred Part 1. If more than one creditor holds a particul	s, list that claim here an ditor's name. If you have ar claim, list the other c	d show both priority and emore than two priority
(i or an explanation of each type of claim, see the i	instructions for this form in the instruction bookle	t.) Total claim	Priority Nonpriority
			amount amount
Blue Ridge Electric Priorly Creditor's Name	Last 4 digits of account number <u>6</u> <u>5</u>	1 8 18 cp. cx	5/89.00 5 - 0 -
Priority Creditor's Name A.O. Box 112 Number Street	When was the debt incurred?	•	
Number Street		-	
1- 1- NE 28/1/E AUZ	As of the date you file, the claim is: Check all t	hat apply	
Lewoir, NC 28645-0112 City State ZIP Code	Contingent		
Who jacurred the debt? Check one.	Unfiquidated	•	
Debtor 1 only	☐ Disputed		
Debtor 2 only	Type of PRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only	☐ Domestic support obligations		
At least one of the debtors and another	Taxes and certain other debts you owe the gove	ernment	
Check if this claim is for a community debt	Claims for death or personal injury while you we	ere .	
Is the claim subject to offset?	intexicated		7
U No	Other Specify Latilities		,
V Yes			
2.2 Priority Creditor's Name	Last 4 digits of account number	\$	s s
Phony Cleunoi's Ivaine	When was the debt incurred?		
Number Street			
·	As of the date you file, the claim is: Check all t	hat apply	
Cha. State 21D Code	☐ Contingent		
City State ZIP Code	☐ Unliquidated☐ Disputed		
Who incurred the debt? Check one. Debtor 1 only	_ 5.554.00		
Debtor 2 only	Type of PRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only	Domestic support obligations		
At least one of the debtors and another	Taxes and certain other debts you owe the gove		
lacksquare Check if this claim is for a community debt	 Claims for death or personal injury white you we intoxicated 	же	
Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify		
— 165			

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Part 2:

List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

	O No. You have nothing to report in this part. Submit this form to the Yes	court with your other schedules.	
i	nonpriority unsecured claim, list the creditor separately for each claim.	rder of the creditor who holds each claim. If a creditor has more than one For each claim listed, identify what type of claim it is. Do not list claims already at the other creditors in Part 3.If you have more than three nonpriority unsecured	
4.1	BACHOME LOANS SERV LP	Total claim CO 350	∞
	Nonpriority Creditor's Name 18 TAPO CANYOW	When was the debt incurred? $3-9-64$	_
	SIMI VALLEY CA 93063 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	☐ Contingent ☐ Up/fquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset? No Yes	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify MoRTGAGE	
4.2	44.5	Last 4 digits of account number	_
	Nonpronty Creditor's Name	When was the debt incurred? 9-5-03	
	Po Box 982238 Number Street TX 79998-2238	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one. Debtor 1 only	Upliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another Check if this claim is for a community debt	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other Specify REVOLVING ACCOUNT	
4.3	BANU DE AMERTE LA	Last 4 digits of account number ? 3 ^ _	
	BANK OF AMERICA Nonpriority Creditor's Name	When was the debt incurred? 6-6-08	
	P.O. B.O.X. 9 Number Street F.L. PASO TX 79998 - 2233 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	•	☐ Contingent	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Upwiquidated Disputed	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	☐ No ☐ Yes	J Other Specify REVOLVING ACCOUNT	

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Your NONPRIORITY Unsecured Claims — Continuation Page

	<u> </u>		
Afte	r listing any entries on this page, number them beginning with 4.4	, followed by 4.5, and so forth.	Total claim
4.4	CHASE BANK ONE CARD SERV	Last 4 digits of account number	5-0-
	Nonpriority Creditor's Name P.O. BOX 15298 Number Street	When was the debt incurred? $7-8-05$	
	Number Street WILMINGTON DE 19850 City State ZIP Code	As of the date you file, the claim is: Check all that apply Contingent	
	Who incurred the debt? Check one.	Unliquidated Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce that 	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	•
	Is the claim subject to offset? No Ves	DOTO Other Specify REVOLVING ACTOUNT	
4.5	NTC FOLIAN CENTAL ALLA LA	Last 4 digits of account number	: - 2 _
	NOTS COVER FINEL SUC LLE Nonpriority Creditor's Name	When was the debt incurred? 6-21-2000	\$ <u></u>
	P.O. Box 15316 Number Street	As of the date you file, the claim is: Check all that apply	
	WILMINGTON, OF 19650-5316 City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one. Debtor 1 only	☐ ∠nliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify REJOLVING ACCOUNT	
	Q Yes		
4.6	USAA SAVINGS BANK Nonpriorly Creditor's Name	Last 4 digits of account number ?	\$
	Nonpriorly Creditor's Name 10750 MCDERMOTT FWYFWY Number Street	When was the debt incurred? 2-13-08	
	SAW ANTONIO TX 78288-1600 City State ZiP Code	As of the date you file, the claim is: Check all that apply. U Contingent	
	Who incurred the debt? Check one	Upliquidated Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim.	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
	\square Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other Specify REVOIVING ACCOUNT	
	☑ Yes		

Cose (10(110c) - (4004) 16-322 18 ----Case 16-50518 Doc 14 Filed 09/20/16 Entered 09/21/16 08:33:02 Your NONPRIORITY Unsecured Clail PCUT Mantuation agg 16 of 32 Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number ___ _ _ _ ___ SST/CIGPFI CORP Nonpriority Creditor's Name

4315 PICKETT ROAD

Number: Street

Street

Street

Street

State

ZIP Code When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent קע 🗖 יישען Who incurred the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify INSTALLMENT ACCOUNT No Yes SST /S Y NO V US
Nonpriority Creditor's Name When was the debt incurred? 3-6-07 4315 PICKETT RD
Number Street As of the date you file, the claim is: Check all that apply ST JOSEPH, MO Contingent امرر 🗖 nliquidated Who incurred the debt? Check one Disputed Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts
Other Specify REVOLVING ACCOUNT Is the claim subject to offset? っ 5-0-

SSTISYNOVUS			Last 4 digits of account number
Nonprionty Creditor's Name 4315 PICKETT R Number Street			When was the debt incurred? $3-6-07$
Number Street ST JOSEPH	M <i>D</i>	64563	As of the date you file, the claim is: Check all that apply.
City	State	ZIP Code	☐ Contingent
			امر 🗅 hliquidated
Who incurred the debt? Check	one		Disputed
Debtor t only			
Debtor 2 only			Type of NONPRIORITY unsecured claim:
Debtor 1 and Debtor 2 only			Student loans
At least one of the debtors and	another		
Check if this claim is for a	community debt	t	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
s the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other Specify
□ No			

(V) Yes

Part 2:

Case number (scown)

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Your NONPRIORITY Unsecured Claim Document Page 17 of 32

After listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total clair
1.10	Jant A distinct of annual to the	7
- NCO FINANCIAL SYSTEMS IN	Last 4 digits of account number	ر s
H315 PICKETT ROAD	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply	
SHINT SOSEPH. MO 64503 City State ZIP Code		
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	Time of NONDRIODITY are sent delains	
	Type of NONPRIORITY unsecured claim:	
Debror 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
\square Check if this claim is for a community debt	you did not report as priority claims	
	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other Specify COLLECTION	
☐ N ₉		
₩Yes		
a		
14	Last 4 digits of account number	S
Nonpriority Creditor's Name	-	
	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	** **	
Debtor 2 only .	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	_	
At least one of the debtors and another	☐ Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
, □ No		
☐ Yes		
<u>2</u>	Last 4 digits of apparent surplies	\$
Nonpriority Creditor's Name	Last 4 digits of account number	
	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☐ Contingent	
	☐ Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		
At least one of the debtors and another	U Student loans	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other Specify	
□ No		

Yes

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Blue Ridge Ele	etric		On which entry in Part 1 or Pa	art 2 did you list the original creditor?
P.O. Box 112			Line 2.1 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street			۵	Part 2: Creditors with Nonpriority Unsecured Claim
Languis MC		8(45.	Last 4 digits of account numb	per <u>6 0 5 1</u>
Lew oir, NC	State	ZIP Code	0115	
Name			On which entry in Part 1 or Pa	art 2 did you list the original creditor?
				Part 1: Creditors with Priority Unsecured Claims
Number Street			Claims	Part 2: Creditors with Nonpriority Unsecured
City	State	ZIP Code	Last 4 digits of account numb	per
,		<u> </u>	On which entry in Part 1 or P	art 2 did you list the original creditor?
Name				•
Number Street			··	Part 1: Creditors with Priority Unsecured Claims
			Claims	Part 2: Creditors with Nonpriority Unsecured
City	State	ZiP Code	Last 4 digits of account number	per
·,	O.O.	LA OBBE	On which entry in Part 1 or Pa	art 2 did you list the original creditor?
Name				Part 1: Creditors with Priority Unsecured Claims
Number Street				Part 2: Creditors with Nonpriority Unsecured
			Claims	
City	State	ZIP Code	Last 4 digits of account numb	per
			On which entry in Part 1 or Pa	art 2 did you list the original creditor?
Name			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street			(]	Part 2: Creditors with Nonpriority Unsecured
			Claims	
City	State	ZIP Code	Last 4 digits of account numb	per
Name			On which entry in Part 1 or Pa	art 2 did you list the original creditor?
			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street			Claims	Part 2: Creditors with Nonpriority Unsecured
			Last 4 digits of account numb	Der .
City	State	ZIP Code		····
Name			On which entry in Part 1 or Pa	art 2 did you list the original creditor?
Number Street				Part 1. Creditors with Priority Unsecured Claims
J			Claims	Part 2: Creditors with Nonpriority Unsecured
City	State	ZIP Code	Last 4 digits of account numb	per

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claim

Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other, Add all other priority unsecured claims. Write that amount here.
- 6e. Total. Add lines 6a through 6d.

- 6a.
- 6b.
- 6c.
- 6d.
- 6e

Total claim

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

6f.

6g.

6h

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Fill in this information to identify your case:	0 01 32
Debtor Michael James Garvey First Name Middle Name Last Name	
Debtor 2 (Spouse If fung) First Name Monte Name Lo Name	
United States Bankruptcy Court for the Western District of N.C.	
Case number 16-50518	_
If known)	☐ Check if this is an amended filing
	amended ming
Official Form 106G	
Schedule G: Executory Contracts and U	nexpired Leases 12/15
Be as complete and accurate as possible. If two married people are filing togethe information. If more space is needed, copy the additional page, fill it out, number additional pages, write your name and case number (if known).	
 Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. Yes. Fill in all of the information below even if the contracts or leases are liste 	You have nothing else to report on this form. d on Schedule A/B: Property (Official Form 106A/B).
 List separately each person or company with whom you have the contract of example, rent, vehicle lease, cell phone). See the instructions for this form in the unexpired leases. 	r lease. Then state what each contract or lease is for (for
Person or company with whom you have the contract or lease	State what the contract or lease is for
Po. Box 112 Number Street	Electrical Power/Service
Lenoir NC 28645-0112. State ZIP Code	
2.2 Bark Mobile	
992 HWY 221 Rus.	Cell Phone Service
Number Street WEST JEFFERSON NC 28694 City State ZIP Code	
2.3	
Name	
Number Street	
City State ZIP Code	
2.4	
Name	
Number Street	
City State ZIP Code	
2.5 Name	
Number Street	
City State ZIP Code	

Fill in this information to identify your case:	Entered 09/21/16 08:33:02 Desc Main 1 of 32
Debtor 1 MICHAEL JAMES GAWLEY	
	_
Debtor 2 Spouse of filing) First Name Madde Name Last Name	-
United States Bankruptcy Court for the Western District of N . C.	
Case number	
(if known)	☐ Check if this is an
	amended filing
Official Form 106H	
Schedule H: Your Codebtors	12/15
Codebtors are people or entities who are also liable for any debts you may are filing together, both are equally responsible for supplying correct infor and number the entries in the boxes on the left. Attach the Additional Page case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either the code of the cod	mation. If more space is needed, copy the Additional Page, fill it out, to this page. On the top of any Additional Pages, write your name and
No	i spouse as a codebior.
☐ Yes	
 Within the last 8 years, have you lived in a community property state of Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, T 	
No. Go to line 3.	
Yes. Did your spouse, former spouse, or legal equivalent live with you	at the time?
□ No	-
Yes. In which community state or territory did you live?	. Fill in the name and current address of that person.
Name of your spouse, former spouse, or legal equivalent	
Number Street	
City State Z	Code
3 In Column 1, list all of your codebtors. Do not include your spouse as shown in line 2 again as a codebtor only if that person is a guarantor Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), Schedule E/F, or Schedule G to fill out Column 2.	or cosigner. Make sure you have listed the creditor on
Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:
3.1 W. A.	
Name ·	☐ Schedule E/F, line
Number Street	☐ Schedule G, line
	P Code
3.2 N.A.	
Name ·	☐ Schedule E/F, line
Number Street	Schedule G, line
City	CIP Code
3.3 N) A	
Name	Schedule D, line
Number Street	Schedule E/F, line
City	RIP Code

		ment Dage	22 of 32	
Fill in this information to identify y	your case:			
Debtor 1 Michael J	HMES G	A RUE Y		
Debtor 2	Midota Name	_ t t Nome		
(Spouse, if fluing) First Name	-			
United States Bankruptcy Court for the:		<u>.</u>		
Case number 16-565	18		Check if th	
	·		An ame	
				lement showing postpetition chapter 13 as of the following date:
Official Form 106l			MM / DE	0/ YYYY
Schedule I: You	r Income			12/15
supplying correct information. If yo	ou are married and not fil se is not filing with you, top of any additional pa	ing jointly, and your do not include inforr	spouse is living with yonation about your spou	r 2), both are equally responsible for ou, include information about your spouse use. If more space is needed, attach a nown). Answer every question.
Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse
If you have more than one job,		,		
attach a separate page with information about additional	Employment status	☐ Employed		Employed
employers.		Not employed		☐ Not employed
Include part-time, seasonal, or		Δ		
self-employed work. Occupation may include student or homemaker, if it applies.	Occupation	Retired		
	Employer's name	N.A.		
	Employer's address	Number Street		Number Street
				
		City	State ZIP Code	City State ZIP Code
	How long employed the	ere?		· .
Part 2: Give Details About	: Monthly Income			
Estimate monthly income as of spouse unless you are separated If you or your non-filing spouse habelow. If you need more space, a	ave more than one employ	er, combine the inform		or that person on the lines
,	•		For Debtor 1	For Debtor 2 or
			****	non-filing spouse
List monthly gross wages, sal deductions). If not paid monthly,			2. <u>\$ - 0 -</u>	\$
3 Estimate and list monthly over	rtime pay.		3. +\$ <u>-</u> \$-	+ \$
4 Calculate gross income. Add li	ine 2 + line 3.		4. \$	\$

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First Name

Middle Name

Last Name

		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	. → 4.	sO	sO-	
5. List all payroll deductions:			1	
5a. Tax, Medicare, and Social Security deductions	5a.	s 6	s	
5b. Mandatory contributions for retirement plans	5b.	\$ - O-	s \	
5c. Voluntary contributions for retirement plans	5c.	s · D -	\$	
5d. Required repayments of retirement fund loans	5d.	\$ -0-	\$	
5e. Insurance	5e.	s ·D -	\$	
5f. Domestic support obligations	5f.	s -O -	\$	
5g. Union dues	5g.	\$ -6-	\$	
5h. Other deductions. Specify:	_	+s -0-	+ s	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5	-	s - D -	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ ~ 0 -	\$	
8. List all other income regularly received:			1	
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8 a.	s 400.65	\$	
8b. Interest and dividends	8b	6 - Q.	\$	
8c. Family support payments that you, a non-filing spouse, or a depen regularly receive	ndent			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	s <u>-0-</u>	\$	
8d. Unemployment compensation	8d.	\$ <u>-0-</u>	\$	
8e. Social Security	8e.	\$	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assist that you receive, such as food stamps (benefits under the Supplementa Nutrition Assistance Program) or housing subsidies. Specify: V, A. Pension		\$ 524 . 22	\$	
8g. Pension or retirement income	 8g.	s 524.00	s	
8h. Other monthly income. Specify: Social Security	8h.	+\$550.00	+ \$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$ 400. [∞]	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	\$1474 <u>@</u>	s ~ D-	= \$1474.0°
11. State all other regular contributions to the expenses that you list in Scl	hedule .	J.		
Include contributions from an unmarried partner, members of your household friends or relatives.	d, your c	dependents, your room	nmates, and other	
Do not include any amounts already included in lines 2-10 or amounts that a	are not a	vailable to pay expens	es listed in Schedule J.	_
Specify:			11. †	s
12. Add the amount in the last column of line 10 to the amount in line 11. T Write that amount on the Summary of Your Assets and Liabilities and Certain			•	s 1474. ∞
13. Do you expect an increase or decrease within the year after you file th	is form	?		monthly income

The person renting in my home May leave at any t:

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Fill in this information to identify y	our case:			
Debtor 1 Wichael Ja	mer Garvey Last Hame	Check if this	is:	
Debtor 2 A	Middle Name Last None	— Arr amen	ded filing	
United States Bankruptcy Court for the V			ment showing postp	
Case number 16-50518		expense:	s as of the following	date.
Official Form 106J				
Schedule J: You	ır Expenses			12/15
Be as complete and accurate as po information. If more space is neede (if known). Answer every question.	ssible. If two married people are fili			
Part 1: Describe Your Hou	sehold			
1. Is this a joint case?				
Da No. Go to line 2. ☐ Yes. Does Debtor 2 live in a s	eparate household?			
□ No□ Yes. Debtor 2 must file	e Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	No No	Danandantia relationship to	Danam da ati'a	Dana dana dan Mira
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	each dependent			☐ No ☐ Yes
				□ No
				☐ Yes
				☐ No ☐ Yes
				☐ No
				Yes
				☐ No ☐ Yes
3 Do your expenses include expenses of people other than yourself and your dependents?	☐ vo ☑ Yes			
Part 2: Estimate Your Ongoin	ng Monthly Expenses			
Estimate your expenses as of your expenses as of a date after the band applicable date.				
Include expenses paid for with non			V	
such assistance and have included 4. The rental or home ownership e	,	•	Your expe	nses
any rent for the ground or lot.	xpenses for your residence. Include	mst mortgage payments and	4 \$	0-
If not included in line 4: 4a. Real estate taxes			4a \$ 901	00/4
4b. Property, homeowner's, or re	enter's insurance		4b \$ QOC	1 60 14
4c. Home maintenance, repair, a			4c \$ 1500	· 62 Y
4d Homeowner's association or	condominium dues		4d \$	>-

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Debtor 1

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	s O -
6.	Utilities:	6a.	\$ 1206.50 / Yea
	6a. Electricity, heat, natural gas	6b.	\$ 100.00 1 4
	6b. Water, sewer, garbage collection	6c.	s 444.001y
	6c. Telephone, cell phone, Internet, satellite, and cable services	6d.	\$ 6
	6d. Other. Specify:		s 2000.°/Y
7.	Food and housekeeping supplies	7.	\$ <u>2068.</u> / /
8.	Childcare and children's education costs	8.	\$ - 0 -
9.	Clothing, laundry, and dry cleaning	9.	\$ 200:17
10.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	s 240.60/Y
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	s 2500.00/y
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	s 240.00/4
14.	Charitable contributions and religious donations	14.	\$ 206.° / Y
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$ <u> </u>
	15b. Health insurance	15b.	\$ ~ 6-
	15c. Vehicle insurance	15c.	s 700.∞/y
	15d. Other insurance. Specify: See Line 11 - Dental Insur Plan	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: estimated Sales Taxes	16.	s 1900.00/Y
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	s <u> </u>
	17b. Car payments for Vehicle 2	17b	\$
	17c. Other, Specify:	17c.	s D:
	17d. Other. Specify:	17d.	s <u> </u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	s_ ~ O-
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$0-
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	e.	
	20a. Mortgages on other property	20a.	s O-
	20b. Real estate taxes	20b	\$_~ 0
	20c. Property, homeowner's, or renter's insurance	20c	\$ <u>`</u> ` <u></u>
	20d. Maintenance, repair, and upkeep expenses	20d	\$ <u> </u>
	20e. Homeowner's association or condominium dues	20 e	\$ - 6-

First Name Middle Name Last Name

Case number (# known) 55 16 - 58518

21. Other. Specify: Legal Fees & Fines

21. +8 1360.00/4

- 22. Calculate your 4891 expenses.
 - 22a. Add lines 4 through 21.
 - 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2
 - 22c. Add line 22a and 22b. The result is your monthly expenses.

- 22a. \$ 14,020.00 -12
- 22b. § 💍
- 22c \$ 14,020.00

- 23. Calculate your monthly net income.
 - 23a. Copy line 12 (your combined monthly income) from Schedule I.
 - 23b. Copy your monthly expenses from line 22c above.
 - 23c. Subtract your monthly expenses from your monthly income.

 The result is your *monthly net income*.

- \$ 1474.00
 - 23b. -\$ 1,168.00
- 23c. \$ 306.00
- 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No Yes.

Evolain here:

The price/east of everything goes normally increases every year.

Case 16-50518 Doc 14 Fill in this information to identify your case:	od 00/20/16		on directed in lines 17 and 24
	of	Accord	as directed in lines 17 and 21: ing to the calculations required by
Debtor 1 Michael James Ga!	YU E Yasi Name		atement
Debtor 2 N.A. Middle Name Middle Name	Last Winne		Disposable income is not determined under 11 U S C § 1325(b)(3)
United States Bankruptcy Court for the Westerm District	of _ N. C.		Disposable income is determined under 11 U.S.C. § 1325(b)(3).
Case number 16 - 56518		=	The commitment period is 3 years.
("known)			The commitment period is 5 years
		□cr	eck if this is an amended filing
Official Form 122C-1			
Chapter 13 Statement of Y	our Current Mont	hly Incom	e
and Calculation of Commit		-	12/15
Be as complete and accurate as possible. If two marris		are equally respons	
more space is needed, attach a separate sheet to this top of any additional pages, write your name and case	form. Include the line number to v		<u> </u>
top or any additional pages, write your frame and case	and the tricking.		
Part 1: Calculate Your Average Monthly Inco	ome		
1. What's your marital and filing status? Check one on	ly.		
Mot married. Fill out Column A, lines 2-11.			
Married. Fill out both Columns A and B, lines 2-11.			
Fill in the average monthly income that you receive bankruptcy case. 11 U.S.C. § 101(10A). For example, August 31. If the amount of your monthly income varied the result. Do not include any income amount more that from that property in one column only. If you have nothing	if you are filing on September 15, the during the 6 months, add the income nonce. For example, if both spouse:	e 6-month period wou e for all 6 months and s own the same rental	old be March 1 through I divide the total by 6. Fill in
		Column A Debtor 1	Column B Debtor 2 or non-filing spouse
Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commissions (before all	\$ <u>~ Ø -</u>	\$ <u>-6-</u>
3. Alimony and maintenance payments. Do not include	payments from a spouse.	s <u>- 0 -</u>	\$
4. All amounts from any source which are regularly pa you or your dependents, including child support. In an unmarried partner, members of your household, you roommates. Do not include payments from a spouse. D listed on line 3.	clude regular contributions from rependents, parents, and	s 3 16 .66	\$
5. Net income from operating a business, profession, farm	or Debtor 1 Debtor 2		
Gross receipts (before all deductions)	\$ <u> </u>		
Ordinary and necessary operating expenses	- \$ <u>0</u> - \$		
Net monthly income from a business, profession, or fami	Copy S here	sO-	\$
6 Net income from rental and other real property	Debtor 1 Debtor 2		
Gross receipts (before all deductions)	\$ <u></u> \$		
Ordinary and necessary operating expenses	- \$ <u>O</u> - \$		
Net monthly income from rental or other real property	\$_ D \$ Copy here	\$ \ <u>D</u> -	\$ ~ D •

total below.

	erst Name Middle Name	Cast Manie D	ocument	Paye 2	0 01 32	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse
	Interest, dividends, and royalties				\$ <u>~</u> O	s <u>~\$-</u>
ţ	Unemployment compensation				<u> </u>	\$
	Do not enter the amount if you conter the Social Security Act. Instead, list it		В	benefit under		
	For you		s 550	.00		1
	For your spouse	.,,,	\$_ ~ C	<u> </u>		
).	Pension or retirement income. Do r benefit under the Social Security Act.	ot include any amo	unt received tha	at was a	s 524.60	\$
0	Income from all other sources not lead to the point include any benefits received received as a victim of a war crime, a domestic terrorism. If necessary, list of	under the Social Se crime against hum	ecurity Act or pa anity, or interna	yments tional or		

11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

Determine How to Measure Your Deductions from Income Part 2:

12. C	opy your	total averag	e monthly	income fr	rom line '	11.	
-------	----------	--------------	-----------	-----------	------------	-----	--

s 898.66

13. Calculate the marital adjustment. Check one:

Total amounts from separate pages, if any.

You are not married. Fill in 0 below.

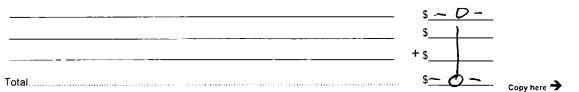
You are married and your spouse is filing with you. Fill in 0 below.

You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.



14. Your current monthly income. Subtract the total in line 13 from line 12.

15 Calculate your current monthly income for the year. Follow these steps:

15b. The result is your current monthly income for the year for this part of the form.

monthly income

De	ebto: 1	Case 16- Michael Fest Name	50518 Sames Middle Name	Doc 14Garue	Filed Poc	09/20/16 u ment –	Ente Page	ered 09/ 29 of 32	21/16 08 number (# knor -	8:33:026	Desc N	Aain 518
16	Calcula	ate the median f	amily incor	ne that applie	s to you.	Follow these s	steps.					
	16a Fil	If in the state in v	vhich you liv	e .		N. Caral:	na					
	16b Fil	II in the number o	of people in	your househol	d.	3						
	To	II in the median for find a list of appartment	olicable med	ian income an	nounts, go	online using t	he link sp	ecified in th				5 <u>58,850</u> . €
17	How do	o the lines comp	pare?									
	17a.	Line 15b is les 11 U.S.C. § 13				op of page 1 of out <i>Calculation</i>						ined under
	17b	Line 15b is mo 11 U.S.C. § 13 On line 39 of the	325(b)(3). G	o to Part 3 an	d fill out	Calculation of	f Your Di	sposable Ir				
Pa	art 3:	Calculate	Your Com	mitment Pe	riod Und	der 11 U.S.C	. § 1325	5(b)(4)				
18	Сору у	our total averag	ge monthly	income from	line 11.					***************************************		s_878.LL
19.	calcula	t the marital adj ting the commitm ount from line 13	nent period i									V_ <u>V.v.s.</u> s
		the marital adjus		not apply, fill ir	n O on line	: 19a	•••••	******				- \$_ <i>O</i> _
	¹ab S	lubtract line 19a	from line 1	Я								s 89Q.LL
20.	Calcul	ate your curren	t monthly in	ncome for the	year. Fo	llow these step	os:					
	20a. C	opy line 19b						• •		••••••		s_898.66
	М	fultiply by 12 (the	number of	months in a ye	ear).							x 12
	20ь. Т	he result is your	current mon	thly income fo	r the year	for this part of	the form.					s 10,783.92
	20c. Ca	ppy the median fa	amily income	for your state	and size	of household f	rom line 1	6c				\$58,850.°°
21.	How d	o the lines com	pare?									
		e 20b is less that e commitment pe				d by the court.	on the top	of page 1	of this form,	check box 3,		
		e 20b is more that eck box 4, <i>The co</i>					by the cou	rt, on the to	p of page 1	of this form,	ı	
Pa	art 4:	Sign Below										
		By signing her	e, under pe	nalty of perjury	ı i declare	that the inform	nation on	this stateme	ent and in a	ny attachment	ts is true an	id correct.
		×M	Ste	nez	<u></u>		×	Signature of	f Dahras 2			
		Signature of	Deplor 1	0				Signature 0	. Jeului Z			
		Date 47 -	18-16	2.				Date	DD /YYY	Y		

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above

Case 16-50518 Entered 09/21/16 08:33:02 Doc 14 Filed 09/20/16 Desc Main Document Page 30 of 32 Local Form 13 AUTHORIZATION TO RELEASE INFORMATION TO THE CHAPTER 13 TRUSTEE REGARDING MORTGAGE CLAIM BEING PAID BY THE TRUSTEE (to be filed with the Court) () Not Applicable Case No. 16 -50518 Debtor Name(s) Michael James Garvey The Debtor(s) in the above captioned bankruptcy case does/do hereby authorize any and all lien holders on real property of the bankruptcy estate to release information to the standing Chapter 13 Trustee upon request. The information to be released includes, but is not limited to, the amount of the post-petition monthly installment payments, the annual interest rate and type of loan, the loan balance, the escrow account(s), the amount of the contractual late charge, and the mailing address for payments. This

information will only be used by the Chapter 13 Trustee and his/her staff in the administration of the

Joint Debtor's Signature

Date

bankruptcy estate and may be included in motions brought before the Court.

Filed 09/20/16 I	Entered 09/21/16 08:33:02	Desc Main
	01 01 32	
Garvey Jat Name Jost Name Jost Name		
		Check if this is an amended filing
Individual	Debtor's Schedul	es 12/15
e equally responsible for s	supplying correct information.	
3571.		imprisonment for up to 20
<u> </u>		tice, Declaration, and
e read the summary and so		1
	Individual e equally responsible for suptcy schedules or amendation with a bankruptcy cas 3571. NOT an attorney to help y	Individual Debtor's Schedul e equally responsible for supplying correct information. aptroxy schedules or amended schedules. Making a false statemention with a bankruptcy case can result in fines up to \$250,000, or 3571. NOT an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Not Signature (Official Form 119).

Case 16-50518VEDoc 14

Clerk
U.S. Bankruptcy Coun Filed 09/20/16 Entered 09/21/16 08:33:02 Desc Main Document Page 32 of 32 SEP 20, 2016 9-19-16 Statesville, NC U.S. Bonkruptcy Court lacks Office 300 West Brood H Room 100 1st Floor Statesville, NC 28677 Re 16-50588 Dear Clerk, Theose file the enclosed B.K. schedules in your usual efficient manner as follows: 106 A/B. 122C-1: 106D, 106 E/F. 106G: 106H. 1061; 106) : foral 70 cm 4 \$ 13, Blease ology me if any problem arise other thon the faid Schedule that not been included as I am unsure of the appropriate intend & content. I will bring Ichedule C with me to the § 341 mooting on Thursday the 22 rd. Thank you for your attention to this Consequential Matter Respectfully Jours 330 Wulter Golber Ad W. Jefferson, NC 28694 336-817-6298 E. mail CPPrepat Shyled. com